



2022 Community First Grant: Partner Application

Ends on September 14, 2022

Welcome to the 2022 Community First Grant: Partner Application!

We are so excited to learn more about your organization and the work you do.

If you have any questions about the Community First Grant or want to get in touch with our team, please reach out to us at grants@wholecitiesfoundation.org.

Note: Submittable does not support Internet Explorer. Please use Mozilla FireFox or Google Chrome for your application. If you have technical issues, please contact support@submittable.com.

Will your project help broaden access to fresh, healthy food and/or nutrition education in your community? *

- ☒ Yes
☐ No

Is your organization locally led? Are members of your organization residents of the community you serve? *

- ☒ Yes
☐ No

Not all team members, board members, and volunteers must be residents of the community you serve, but robust community representation is important.

Does your organization have strong community engagement? Do you request and use feedback from your community? *

- ☒ Yes
☐ No

Does your work focus on long term food access or nutrition education? This grant will NOT be the best fit for food redistribution or produce donation programs. *

- ☒ Yes
☐ No

Is your program focused on serving adults and/or older youth (ages 16-22)? *

- ☒ Yes
☐ No

This grant will NOT be the best fit for programs primarily focused on children or based in schools. Our sister foundation, Whole Kids, offers many grant programs that may be a better fit. To find out more, please visit their website: www.wholekidsfoundation.org

Are you willing to submit a mid-year report and an end of grant report to communicate your

Are you willing to submit a mid-year report and an end-of-grant report to communicate your progress? *

- ☒ Yes
☐ No

US: Is your organization registered as a 501(c)3 nonprofit or are you partnered with a 501(c)3 nonprofit? Canada: Is your organization a registered charity or are you partnered with a registered charity? *

- ☒ Yes
☐ No

We are only able to provide funds to 501(c)3 registered nonprofit organizations.

Organization's Name *

Official Address Line 1 (If selected for a grant, this is the address we will include in the grant agreement) *

Address Line 2

City *

State/ Province/ Territory *

ZIP/ Postal Code *

Mailing Address for Grant Payment (If selected for a grant, this is where we'll send the grant check). If this is the same as your official address, you do not need to complete this.

Country

Address

Address Line 2 (optional)

City

State, Province, or Region

Zip or Postal Code

Website (or Facebook page/ Instagram/ etc. if you don't have a website) *

Executive Director's Name *

Executive Director's Email *

Executive Director's Phone Number *

Main Contact's Name *

Main Contact's Email *

Main Contact's Phone Number *

Please list your or your fiscal agent's EIN. If you are in Canada, please list your Canadian charity registration number. *

Please summarize your organization's main goals and activities: *

Limit: 300 words

Please tell us about your organization's fresh, healthy food access or nutrition education work. *

Limit: 300 words

Which category best describes the fresh, healthy food access PROJECT you are requesting funding for? Note: This does not need to be the best category that fits your organization's work OVERALL. *

- ☒ Community Garden
- ☐ Urban Farm
- ☐ Agricultural Skills Development
- ☐ Farmers Market or Co-Op
- ☐ Pop Up Market or CSA
- ☐ SNAP Incentive Program
- ☐ Mobile Market
- ☐ Nutrition Education or Healthy Cooking Class
- ☐ Other

Does your organization have hydroponic and/or aquaponic projects? *

- ☐ Yes
- ☐ No

Why do we ask? We are sometimes able to put organizations who have hydroponic/ aquaponic projects in touch with an entity that supplies in kind donation of equipment.

Does your project earn income from the sale of produce or other activities? *

- ☐ Yes
☐ No

This does not include grant funding or donations.

Optional: We know many partners have taken their cooking classes, gardening workshops, and other work online. If you would like to share any links, please list them here.

Please tell us how you would spend a \$8,000 USD/ \$10,000 CAD grant from Whole Cities Foundation and how these expenses would help you reach your fresh, healthy food access goals. *

Limit: 300 words

There is no limit on the amount that may be used for overhead and ongoing expenses. We want to support your goals and invite you to let us know how the funding could be best put to use in your work!

How will this work impact the local community in ways besides fresh, healthy food access? *

Limit: 300 words

Are your leaders, employees, and volunteers members of the community you serve? Do you have a community advisory board or steering committee? Do your leaders have lived experience facing barriers to healthy food access? *

How does your organization request and use feedback from the community you serve? *

How will you measure the success of your fresh, healthy food access work? *

Does your project aim to serve a certain group of community members (senior citizens, veterans, families, etc.)? *

- ☐ Yes
☐ No

We support both targeted and broad programs, but your response helps us better understand the scope of your project and ensure alignment with our mission (supporting the expansion of healthy food access and nutrition education for communities experiencing major barriers to healthy food access).

If your Whole Cities grant application is approved, is there anything that would prevent you from starting your fresh, healthy food access work? *

- ☐ Yes
☒ No



*Canadian partners, because we write our checks in USD, please fill out the form using USD estimates.

There is no limit on the amount that may be used for overhead and ongoing expenses. We want to support your goals and invite you to let us know how the funding could be best put to use in your work!

Please complete the Organizational Financial Statement Table below. Please do not use commas. *



Statement Period (MM/DD/YYYY)-(MM/DD/YYYY)	
ANNUAL INCOME	
1. Fees for Services or Goods	
2. Individual and Corporate Donations	
3. Grants	
4. Government Support	
5. Other (specify below):	
TOTAL:	0
ANNUAL EXPENSES	
1. Rent	
2. Maintenance and Repairs	
3. Supplies and Equipment (specify below):	
4. Salaries and Wages	
5. Travel and Transportation	
6. Insurance	
7. Taxes	
8. Utilities	
9. Technology and Communications	
10. Fundraising and Marketing Expenses	
11. Programs (specify below):	
12. Other Expenses::	
TOTAL:	0
NET INCOME:	0

Please use your most recent complete fiscal year to complete this form.

Please upload your IRS 501(c)3 determination letter (US) or Notification of Registration letter (CA). If you will be partnering with a fiscal agent, please upload their IRS 501(c)3 determination letter. *

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .pdf, .doc, .docx, .jpg, .jpeg, .png

Please upload 5-10 media released, 1mb+ photos of your organization's work in action. *

Choose File

Select up to 10 files to attach. No files have been attached yet. You may add 10 more files.

Acceptable file types: .jpg, .jpeg, .png

Media Release Policy

If your application is selected, Whole Cities Foundation would like to share the good news publicly! By submitting this application, your organization gives Whole Cities Foundation and third-party supporters (such as supplier donors, Whole Foods Market, Team Members, etc.) of the Foundation permission to share information such as a description of your project, how Whole Cities Foundation's funding is contributing to its success, any photos you send us, and your logo (we'll share our logo with you too). We share information on our website and social media accounts as well as through Whole Foods Market's marketing and press offices. Any images, videos, and multimedia submitted in this application or during progress reports, should be original content for which you own exclusive rights to display, share, reproduce and authorize use by Whole Cities Foundation and third-party supporters. In the event that Whole Cities Foundation or hired freelancers capture original photos or videos of your location, project or volunteer events, we will have all parties agree and sign a release form. See example [here](#).

Please check the box below to agree to Whole Cities Foundation's Media Release Policy. *

☐ I agree

Save Draft

Submit